

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | Application or Docket Number <i>09/344688</i> | | |
|---|----------------------------------|------------------------------------|---------------|-------------|--|-----------|----------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | | |
| FOR | NUMBER FILED | NUMBER EXTRA | RATE | FEES | RATE | FEES | |
| BASIC FEE 37 CFR 1.14(a) | | | | \$380 | | | |
| TOTAL CLAIMS 37 CFR 1.14(d) | 14 | minus 20 = 0 | x \$ = | | OR x \$ = | \$ = | |
| INDEPENDENT CLAIMS 37 CFR 1.14(d) | 3 | minus 3 = 0 | x \$ = | | OR x \$ = | | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.14(d)) | | | x \$ = | | OR x \$ = | | |
| | | | + \$ = | | OR + \$ = | | |
| | | | TOTAL \$380 | | OR TOTAL | | |
| • If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | |
| CLAIMS AS AMENDED - PART II 3 - 20 - 06 (Column 1) (Column 2) (Column 3) | | | | | SMALL ENTITY OR OTHER THAN SMALL ENTITY | | |
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | Total 37 CFR 1.14(d) | 14 | Minus 20 = 0 | x \$ = | 0 | OR x \$ = | |
| Independent 37 CFR 1.14(d) | 3 | Minus 3 = 0 | x \$ = | 0 | OR x \$ = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(d)) | | | | + \$ = | 0 | OR + \$ = | |
| | | | | TOTAL | 0 | OR TOTAL | ADDITIONAL FEE |
| 6-12-66 (Column 1) (Column 2) (Column 3) ADDIT. FEE | | | | | RATE ADDITIONAL FEE | | |
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | Total 37 CFR 1.14(d) | 14 | Minus 20 = 0 | x \$ = | 0 | OR x \$ = | |
| Independent 37 CFR 1.14(d) | 3 | Minus 3 = 0 | x \$ = | 0 | OR x \$ = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(d)) | | | | + \$ = | 0 | OR + \$ = | |
| | | | | TOTAL | 0 | OR TOTAL | ADDITIONAL FEE |
| (Column 1) (Column 2) (Column 3) ADDIT. FEE | | | | | RATE ADDITIONAL FEE | | |
| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| | Total 37 CFR 1.14(d) | Minus | 00 | x \$ = | | OR x \$ = | |
| Independent 37 CFR 1.14(d) | Minus | 000 | x \$ = | | OR x \$ = | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.14(d)) | | | | + \$ = | | OR + \$ = | |
| | | | | TOTAL \$380 | | OR TOTAL | ADDITIONAL FEE |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.7 hours to complete. This will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.